Attorney Docket No.

032264-051

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

RECEIVED CENTRAL FAX CENTER

James Patrick Hamilton

Group Art Unit: 1755

Examiner: Elizabeth A. Bolden

Application No.: 10/613,939

Filing Date:

July 7, 2003

Confirmation No.: 6774

JUL 0 5 2005

Title: LOW BORON E-GLASS COMPOSITION

## REQUEST FOR CONTINUED EXAMINATION TRANSMITTAL LETTER

MAIL STOP RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

0:-	_
2311	_

		examination under 37 C.F.R. § 1.114 and enclose the
\$395.00 (2801)	<b>3790.00 (1801)</b>	fee due under 37 C.F.R. § 1.17(e).

	\$39	5.00	(280	01) 🗵 \$790.00 (1801) fee due under 37 C.F.R. § 1.17(e).		
1.	×	A.	App	olicant(s) requests that any previously unentered after final amendments <u>not</u> be entitinued examination is requested based on the enclosed documents identified in it	tered. em 2 below.	
		В.		olicant(s) previously submitted the following documents for which continued examinuested:	nation is	
				Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on	·	
				Consider the arguments in the Appeal Brief or Reply Brief previously filed on		
				Other:		
2.			omen offida ofform office offi	ing documents are enclosed with this submission: idment/Reply. vit(s)/Declaration(s). nation Disclosure Statement (IDS). ition for Extension of Time. : Petition Under 37 C.F.R. 1.313 (c)(2) to Withdraw Application from Issue		5 10613939
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				REQUEST FOR CONTINUED EXAMINATION TRANSMITTAL LETTER	Page 1 of 2 (12/04)	RFEKADU1 00
RCVE	AT 7	<i>151</i> 200	5 4:45	:01 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-1/8 * DNIS:8729306 * CSID: * DURATION (mm-ss):09-40		1/07/2005
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## RECEIVED CENTRAL FAX CENTER

Attorney Docket No.

P.03/42

JUL 0 5 2005

Oocket No. 032264-051 Application No. 10/613,939

3.	Small entity status is hereby claimed.
	No additional claim fee is required.
	The fee is calculated below on the basis of the highest number of claims already paid for in this
	application prior to this submission:

				CLAIMS		
	No. of Claims			Extra Claims	Rate	Fee
Examination Fee (18	301)					\$ 790.00
Total Claims	16	MINUS	20 =	0	× \$50.00 (1202) =	\$ 0.00
Independent Claims	1	MINUS	3 =	0	x \$200.00(1201) =	\$ 0.00
if multiple dependent	claims are p	resented	, add \$	360.00 (1203)		
Total Fee						\$ 790.00
Small Entity Statu	s claimed - s	ubtract 5	0% of T	otal Application Fe	98	\$ 0.00
TOTAL FEE DUE			_, ***			\$ 790.00

4.		A check in the amount of is enclosed for the fee due.
5.	×	Charge \$790.00 to Deposit Account No.10-0625 for the fee due.
6.		Charge to credit card. Form PTO-2038 is attached.
7.		Applicant(s) requests suspension of action by the Office until at least, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 10–0625 This paper is submitted in duplicate.

Respectfully submitted,

P.O. Box 1404 Alexandria, Virginia 22313-1404 (703) 836-6620

Filed: July 5, 2005

Ву

Robert D. Touslee

Registration No. 34,032

Peg. No 45,774